



PURCHASE ORDER

PO Number:303-7-0285
Requisition Number:303-7-00467

Order Date: 11/22/2016
Released

MAIL INVOICE TO AGENCY BELOW
 TEXAS FACILITIES COMMISSION
 FISCAL MANAGEMENT / ACCOUNTS PAYABLE
 P.O. BOX 13047 Austin, Texas 78711-3047
 OR
 email to: accountspayable@tfc.state.tx.us

Delivery Location

--Select--
Show numbers on all papers and packages

Referenced Source or Vendor

35375375371
 DEPARTMENT OF STATE HEALTH SERVICES
 PO BOX 149347
 Asbestos Notification Program
 AUSTIN, TX 787149347
 Phone:5128346770 ext. 2764, Fax:

EXEMPT WITH SPECIFIC LEGAL CITE:

Description TGC771 INTERAGENCY COOPERATION ACT
 Purchase Order to pay Asbestos Abatement/Demolition Notification Fee Invoice.

Line Items

Description	Qty	Unit	Unit Price	Start Date	End Date	Total
Purchase Order to pay Asbestos Abatement/Demolition Notification Fee Invoice.						
NIGP Class: 963	1	FEE	\$57.00			\$57.00
NIGP Item: 39						
Object Class: 272						
Reimbursement Type: Not Reimbursable						
Grand Total						\$57.00

Questions or concerns regarding this transaction or service should be directed to: Texas Facilities Commission Procurement Division, Phone: (512) 463-0209 or FAX: (512)236-6164 (The mailing address for the Texas Facilities Commission is at the top of this purchase order.)

Agency	TFC
Fiscal Year	2017
Division	Facilities Design and Construction
Program	Facilities Design and Construction
Phone	5124633388
Org Code	NONTFC CONSTRUCTION - Project Funding Not Controlled Through TFC
Type of Purchase/PCC Code	Exempt With Specific Legal Citation - "-"
Work Order Number	N/A

ALL TERMS AND CONDITIONS SET FORTH IN OUR BID INVITATION BECOME A PART OF THIS ORDER. VENDOR GUARANTEES MERCHANDISE WILL MEET OR EXCEED SPECIFICATIONS IN THE BID INVITATION.

Invoicing Standards

To facilitate payments from Texas Facilities Commission please follow the invoicing standards set forth below.

The invoice should include, but is not limited to including:

- (1) the vendor's mailing and e-mail (if applicable) address;
- (2) the vendor's telephone number;
- (3) the name and telephone number of a person designated by the vendor to answer questions regarding the invoice;
- (4) the state agency requisition number;
- (5) the state agency's name, agency number, and delivery address;
- (6) the commission's purchase order number, if applicable;
- (7) the contract number or other reference number if applicable;
- (8) a valid Texas Identification Number (TIN) issued by the Comptroller of Public Accounts;
- (9) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (10) unit numbers corresponding to the original order; and
- (11) other relevant information supporting and explaining the payment requested or identifying a successor organization to an original vendor, if necessary.

FOB DESTINATION CASH DISCOUNT: 0% 0 DAYS.

TEXAS FACILITIES COMMISSION INTERNAL PURCHASING

PURCHASER: _____

Ehlert, Richard - CTPM, 5124630209

(IN ACCORDANCE WITH YOUR BID, SUPPLIES MUST BE PLACED IN THE AGENCY RECEIVING ROOM IN DAYS FROM RECEIPT OF ORDER.)

STATE AND CITY SALES TAX EXEMPTION CERTIFICATE: The undersigned claims an exemption from taxes under Chapter20, Title 122A, Revised Civil Statutes of Texas, for purchase of tangible personal property described in this number order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas

(Show Terms And Conditions...)